



HOME OFFICE ... OMAHA, NEBRASKA

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February 21, 1968

Government Employees Health Association P. O. Box 463 Washington, D. C.

Re:

Your February 16, 1968 letter in which you requested the rates of hospitals in the different metropolitan areas. Please fine attached.

Dear Leonard:

This is similar to the information I sent you on June 14, 1967.

Sincerely,

T. W. Premo, Manager Claims Department

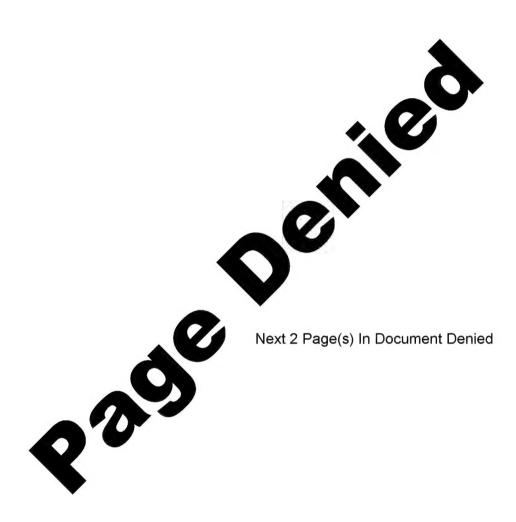
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Enclosures

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MUTUAL OF OMAHA INSURANCE COMPANY . UNITED BENEFIT LIFE INSURANCE COMPANY



26 FEB 1968

NOTE TO: DC/BSD

I would like to submit this proposal to the Board within the next few weeks. Please draft a paper that would have a short summary of what this program is and what it is intended to do. Include on the paper the rates. After review, we will have enough cut for circulation to each Board member.



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# A PROPOSED GROUP INSURANCE PROGRAM

prepared for:

GOVERNMENT EMPLOYEES HEALTH ASSOCIATION

by: UNITED BENEFIT LIFE INSURANCE COMPANY

HOME OFFICE - OMAHA, NEBRASKA

United Benefit Life Insurance Company ranks among the top 3% of all life insurance companies.

The reason for this successful growth is service. To provide this service, United has a network of strategically located group offices staffed with trained and experienced group representatives. In addition, United Benefit Life Insurance Company offers its policyholders the services of expert underwriting, administrative and actuarial personnel necessary to the proper functioning of sound Group Insurance and Pension Programs. Long noted for prompt claim payments, United has pioneered the field of claim research service to help stabilize the policyholder's premium dollar through study and analysis of claims and medical cost trends.

The strength and stability of this Company is reflected in the annual statement for the year ending December 31, 1966.

ASS	<b>ETS</b>
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5613										1966
Cash										\$ 1,556,919
Bonds										227,749,200
Stocks										66,962,851
Real Estate										16,067,409
Mortgage Loans .										183,804,160
Policy Loans .										35,214,912
Premiums in Cour	se of	Co	llecti	on						15,386,068
Other Assets .										6,116,673
Total .			•					•		\$552,858,192

# LIABILITIES

Reserves for Claims			•					\$ 5,233,607
Policy Reserves								
Reserves for Taxes								3,556,571
Reserves for Security Valuation								14,764,782
Other Liabilities								
TOTAL LIABILITIES .				• ,				\$478,211,463
Surplus to Protect Policyholders								
Total		•	•	•	ŕ	•		\$552,858,192

# SECURITY IS OUR BUSINESS

GP4 2-67

## GOVERNMENT EMPLOYEES

## HEALTH ASSOCIATION

# Group Hospital Indemnity Plan

#### BENEFITS

In-Hospital

The plan provides a daily benefit of \$20 for up to 365 days of hospital confinement for each accident or sickness.

Plan I

Plan II

Maximum Days

30

365

Confinements separated by less than three months for the same or related conditions will be considered as continuations of the same confinement.

#### ELIGIBILITY PROVISIONS

All paid-up members of G.E.H.A. under age 60 are eligible to enroll in the group plan upon submitting satisfactory evidence of insurability.

The plan will become effective on the first of the month after 400 members have applied for coverage and have submitted satisfactory evidence of insurability.

#### TERMINATIONS

The coverage will terminate on the date the insured attains age 65 or the date he becomes eligible for Medicare, whichever is the earlier.

The coverage will not extend beyond the date to which the member's dues are paid.

The coverage will terminate on the date the master policy terminates.

## EXCLUSIONS AND LIMITATIONS

The plan does not cover losses resulting from: (1) declared or undeclared war or act of war; (2) service in the armed forces of any country; (3) acts of intentional self-destruction or attempted suicide while sane or insane; (4) pregnancy (including childbirth or resulting complications); (5) confinement in any institution primarily operated as a home for the aged or engaged in the care of drug addicts or alcoholics; (6) confinement in any institution operated by the U.S. Government, a state, country, or municipal government, unless a charge is made by such a hospital which the member is legally required to pay.

#### ADMINISTRATION

The policyholder will handle all administrative procedures including initial underwriting, premium collection, and pay all claims.

## SEMI-ANNUAL PREMIUMS

Member	Plan I	Plan II
Under Age 40	\$ 8.00	\$ 9.00
40 through 49	12.00	13.00
50 through 64	18.50	21.00

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Plan I

Commissions: 10 Yr. Level

## NAME G.E.H.A. HOSPITAL INDEMNITY

## RETENTION EXHIBIT

Administration:

Net Annual Premium

Incurred Claims

	500		EE Lives	1,000	A	dministration: IBM Cards Initial Certs Renewal Certs Benefits	Self-Admini	stration stration stration	mmissions: 10 Yr. Level	
Net Annual Premium	Incurred Claims	Rete	ention	Ref	und	Agent Commission	Taxes	Administrative Expense	Amortization of Acquisition	Risk Charge
	\$109,550	\$12,733	8.14%	\$34,217	21.86%	\$2,169	\$2,445	\$4,403	\$1,368	\$2,348
156,500	109,550	12,729	8.13	34,221	21.87	2,169	2,445	4,403	1,364	2,348
156,500	109,550	11,930	7.62	35,020	22.38	2,169	2,429	4,403	1,364	1,565
156,500	109,550	11,930	7.62	35,020	22.38	2,169	2,429	4,403	1,364	1,565
156,500	109,550	11,930	7.62	35,020	22.38	2,169	2,429	4,403	1,364	1,565
156,500	109,550	10,538	6.73	36,412	23.27	2,169	2,401	14,1403	-	1,565
156,500	109,550	10,538	6.73	36,412	23.27	2,169	2,401	4,403	-	1,565
156,500	109,550	10,538	6.73	36,412	23.27	2,169	2,401	4,403	-	1,565
156,500	109,550	10,538	6.73	36,412	23.27	2,169	2,401	4,403	-	1,565
156,500	109,550	10,538	6.73	36,412	23.27	2,169	2,401	4,403	-	1,565
	109,550	11,394	7.28	35,556	22.72	2,169	2,418	4,403	682	1,722
	Net Annual Premium \$156,500 \$1	Net Annual Fremium Claims  1 \$156,500	Net Annual Fremium Claims Reternal \$156,500 \$109,550 \$109,550 \$12,733 \$156,500 \$156,500 \$109,550 \$12,733 \$156,500 \$109,550 \$12,729 \$156,500 \$109,550 \$11,930 \$156,500 \$109,550 \$11,930 \$156,500 \$109,550 \$10,538 \$156,500 \$109,550 \$10,538 \$156,500 \$109,550 \$10,538 \$156,500 \$109,550 \$10,538 \$156,500 \$109,550 \$10,538 \$156,500 \$109,550 \$10,538 \$156,500 \$109,550 \$10,538 \$156,500 \$109,550 \$10,538 \$156,500 \$109,550 \$10,538 \$156,500 \$109,550 \$10,538 \$156,500 \$109,550 \$10,538 \$156,500 \$109,550 \$10,538 \$156,500 \$109,550 \$10,538 \$156,500 \$109,550 \$10,538 \$156,500 \$109,550 \$10,538 \$156,500 \$109,550 \$10,538 \$156,500 \$109,550 \$10,538 \$156,500 \$109,550 \$10,538 \$100,538 \$100,550	Net Annual   Incurred   Retention	Net Annual   Incurred   Retention   Ref	Net Annual   Incurred   Retention   Refund	Net Annual   Thoursed   Retention   Refund   Commission   Refund   Refund   Commission   Refund   Refund   Commission   Refund   R	Net Annual   Incurred   Claims   Retention   Refund   Refund   Commission   Taxes   Refund   Commission   Taxes   Refund   Refu	Net Annual   Incurred   Fremium   Claims   Retention   Refund   Commission   Taxes   Expense   Expense   Premium   Premium   Claims   Retention   Refund   Commission   Taxes   Administration   Refund   Refund	Net Annual

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Plan II

## NAME G.E.H.A. HOSPITAL INDEMNITY

## RETENTION EXHIBIT

Health Total	Premium \$313,00 \$313,00

Net Annual	
Premium	
\$313,000	
\$313,000	

Incurred	
Claims	
\$219,100	
\$219,100	

EE Lives 2,000

Administration: IBM Cards

IBM Cards Self-Administration
Initial Certs Self-Administration
Renewal Certs Self-Administration
Benefits Self-Administration

Commissions: 10 Yr. Level

	Net Annual Premium	Incurred Claims	Rete	ntion	Ref	und	Agent Commissions	Taxes	Administrative Expense	Amortization of Acquisition	Risk Charge
Year 1	\$313,000	\$219,100	\$18,998	6.07%	\$74,902	23.93%	\$2,755	\$4,760	\$5,879	\$1,692	\$3,912
2	313,000	219,100	18,998	6.07	74,902	23.93	2,755	4,760	5,879	1,692	3,912
3	313,000	219,100	18,200	5.81	75,700	24.19	2,755	4,744	5,879	1,692	3,130
4	313,000	219,100	18,200	5.81	75,700	24.19	2,755	4,744	5,879	1,692	3,130
5	313,000	219,100	18,200	5.81	75,700	24.19	2,755	4,744	5,879	1,692	3,130
6	313,000	219,100	16,474	5.26	77,426	24.74	2,755	4,710	5,879	-	3,130
7	313,000	219,100	16,474	5.26	77,426	24.74	2,755	4,710	5,879	-	3,130
8	313,000	219,100	16,474	5.26	77,426	24.74	2,755	4,710	5,879	-	3,130
9	313,000	219,100	16,474	5.26	77,426	24.74	2,755	4,710	5,879	· -	3,130
10	313,000	219,100	16,474	5.26	77,426	24.74	2,755	4,710	5,879	-	3,130
10 Yr. Avg.	313,000	219,100	17,497	5 - 59	76,403	24.41	2,755	4,731	5,879	846	3,286

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Plan III

## NAME G.E.H.A. HOSPITAL INDEMNITY

## RETENTION EXHIBIT

Heal Tota			Incurred Claims \$328,650 \$328,650	EE Lives	3,000	Ad	ministration: IBM Cards Initial Certs Renewal Certs Benefits	Self-Admini Self-Admini Self-Admini Self-Admini	stration stration stration	mmissions: 10 Yr. Level	
•	Net Annual Premiums	Incurred Claims	Rete	ntion	Refun	<u>d</u>	Agent Commission	Taxes	Administrative Expense	Amortization of Acquisition	Risk Charge
l	\$469,500	\$328,650	\$24,073	5.13%	\$116,777	24.87%	\$2,935	\$7,052	\$6,525	\$1,692	\$5,869
2	469,500	328,650	24,073	5-13	116,777	24.87	2,935	7,052	6,525	1,692	5,869
3	469,500	328,650	22,875	4.87	117,975	25.13	2,935	7,028	6,525	1,692	4,695
4	469,500	328,650	22,875	4.87	117,975	25.13	2,935	7,028	6,525	1,692	4,695
5	469,500	328,650	22,875	4.87	117,975	25.13	2,935	7,028	6,525	1,692	4,695
6	469,500	328,650	21,148	4.50	119,702	25.50	2,935	6,993	6,525	-	4,695
7	469,500	328,650	21,148	4.50	119,702	25.50	2,935	6,993	6,525	-	4,695
8	469,500	328,650	21,148	4.50	119,702	25.50	2,935	6,993	6,525	-	4,695
9	469,500	328,650	21,148	4.50	119,702	25.50	2,935	6,993	6,525	-	4,695
10	469,500	328,650	21,148	4.50	119,702	25.50	2,935	6,993	6,525	-	4,695
lO Yr.	469,500	328,650	22,251	4.74	118,599	25.26	2,935	7,015	6,525	846	4,930